



# NORTHSHORE TECHNICAL COMMUNITY COLLEGE

## STUDENT GRIEVANCE FORM

*Please exercise care in completing this form. Take the time to print or write clearly.*

Student Name: \_\_\_\_\_

Student's Social Security Number: \_\_\_\_\_ LoLA ID \_\_\_\_\_

**(THE SSN MUST BE CONCEALED ON ALL COPIES MADE OF THIS DOCUMENT)**

Today's Date: \_\_\_\_\_

Date of the Alleged Grievance: \_\_\_\_\_

Location of the Alleged Grievance: \_\_\_\_\_

Time of the Alleged Grievance: \_\_\_\_\_

Name of the Respondent: \_\_\_\_\_

### DESCRIBE THE ALLEGED GRIEVANCE

Instructions: Be specific. Describe clearly the alleged grievance. (If necessary, seek assistance from a person of your choice in preparing this form.)

Please attach to this form any written and signed statements or other evidence which support your description of the alleged grievance.

**Note:** if you have already completed and turned in a **Student Incident Report** and have no additional information to provide you may check here:  sign and date the form on the next page.

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- .
- .
- .

**What remedy/solution are you seeking?**

**Please list all attachments that you are including with this form:**

- .
- .
- .

Signature: \_\_\_\_\_ Date: \_\_\_\_\_